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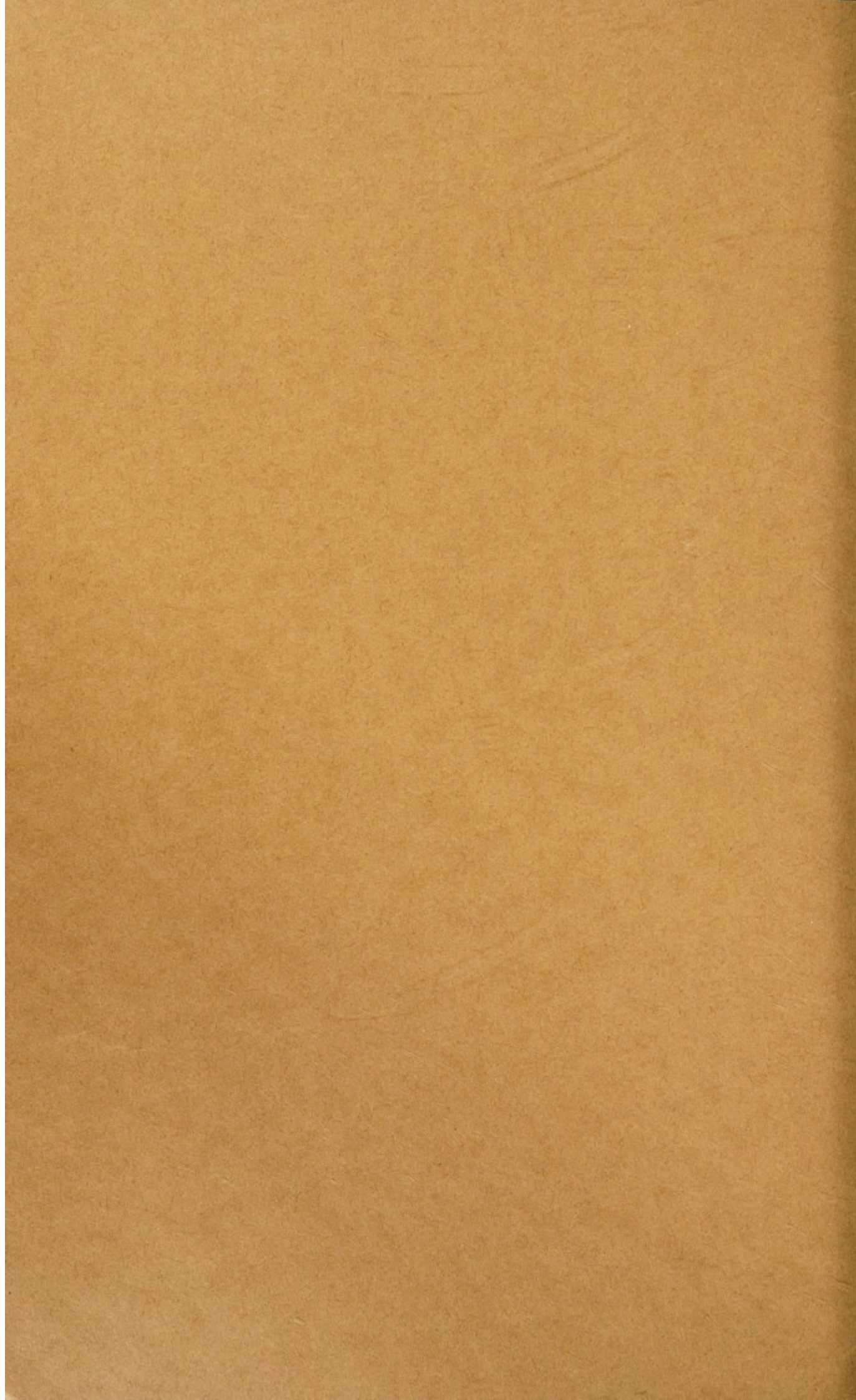
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# Annual Report

of the  
PRINCIPAL  
SCHOOL MEDICAL OFFICER  
FOR 1973

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NORFOLK EDUCATION COMMITTEE

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## STAFF

### County Medical Officer and Principal School Medical Officer:

A. G. SCOTT, M.B., Ch.B., M.F.C.M., D.P.H.

### Deputy County Medical Officer and Deputy Principal School Medical Officer:

I. C. BRANNEN, M.B., Ch.B., M.R.C.P.E., M.F.C.M., D.P.H.

### Senior Medical Officers:

A. N. HUNTER, M.B., Ch.B., M.F.C.M., D.P.H.

A. S. LINDSAY, M.B., Ch.B., M.F.C.M., D.P.H.

### Assistant Senior Medical Officer:

C. H. B. LAWFIELD, M.A., M.R.C.S., L.R.C.P., M.F.C.M.

### School Medical Officers:

(Also County Departmental Medical Officers and District Medical Officers of Health)

J. McD. HANLEY, L.R.C.P., L.R.C.S., L.R.F.P. & S., M.F.C.M., D.P.H.

R. D. HARLAND, M.R.C.S., L.R.C.P., M.F.C.M., D.T.M. & H., D.P.H.

G. R. HOLTBY, M.D., M.F.C.M., D.P.H., D.I.H.

LYDIA MCMURDO, M.R.C.S., L.R.C.P., M.F.C.M., D.P.H.

L. G. POOLE, M.B., Ch.B., M.F.C.M., D.T.M. & H., D.P.H.

### School Medical Officers:

(Also Departmental Medical Officers)

#### Full-time

E. J. APPLEGATE, M.B., B.S., D.Obst.R.C.O.G.

SYBIL E. CATOR, M.B., Ch.B.

E. B. PHILLIPS, M.B., B.Ch., B.Sc.

KATHERINE B. WORLEY, M.B., Ch.B., D.P.M.

#### Part-time

PAMELA L. C. BAVIN, M.B., Ch.B., D.Obst.R.C.O.G.

CHRISTINE R. COUPLAND, M.B., Ch.B.

ELIZABETH M. ELLIOTT, M.B., B.Ch., B.A.O.

J. D. FRASER, M.D., D.P.M.

DOROTHEA M. HOOPER, M.B., B.S.

PAMELA HUNTER, M.B., B.S., D.P.H.

BARBARA I. JOHNSON, M.B., Ch.B., D.Obst.R.C.O.G.

MARGARET C. RICHARDS, M.B., B.S.

A. S. ROBERTSON, M.B., Ch.B.

EILEEN M. STEELE, M.B., B.S. (to 31.12.1973)

### Dental Anaesthetists:

T. F. APTHORPE, M.B., B.S., D.Obst.R.C.O.G.

D. J. Y. DYER, M.B., B.S., D.Obst.R.C.O.G., D.A. (from 21.9.1973)

D. A. H. LANGMAN, M.B., B.S., M.R.C.S., L.R.C.P.

G. W. THOMAS, M.B., B.S., M.R.C.S., L.R.C.P., F.F.A., R.C.S., D.A., D.Obst.R.C.O.G.

### Principal School Dental Officer:

N. J. ROWLAND, L.D.S., R.C.S. (Edin.)



#### **Area Dental Officers:**

EDITH P. CHURCHYARD, L.D.S., R.C.S. (Eng.)  
J. L. TAYLOR, L.D.S., R.C.S. (Edin.)  
A. M. WILSON, L.D.S., R.C.S. (Edin.)  
S. H. WOONTON, L.D.S., R.C.S. (Eng.)

#### **Full-time**

#### **Dental Officers:**

RUTH M. ALLTON, B.D.S.  
B. BOYD-COOPER, M.R.C.S., L.R.C.P., L.D.S., R.C.S. (Eng.)  
L. W. BROCKHURST, B.D.S.  
G. B. BROWN, B.D.S. (from 12.2.1973)  
IRENE COLLARD, L.D.S.  
E. V. DOWNES, L.D.S., R.C.S. (Eng.)  
KATHRINE A. LEWIS, L.D.S., R.C.S. (Irel.) (from 1.2.1973)  
A. C. MACLEOD, L.D.S., R.C.S. (Edin.)  
J. A. McMULLAN, F.F.D., R.C.S. (Irel.) (from 1.1.1973 to 30.11.1973)  
C. E. MORRIS, B.D.S., L.D.S., R.C.S. (Eng.)  
R. SHARP, L.D.S., R.C.S. (Eng.)  
MARGARET WILSON, L.D.S., R.C.S. (Edin.)

#### **Part-time**

G. N. W. BOOTH, L.D.S., R.C.S. (Eng.) (to 9.3.1973)  
DEIDRE A. CUBITT, B.D.S., L.D.S., R.C.S. (Eng.)  
A. H. ROBB, B.D.S. (from 12.3.1973)

#### **Director of Nursing Services:**

MISS M. WEARMOUTH, S.R.N., S.C.M., H.V.Cert., Q.N.

#### **Divisional Nursing Officer:**

MISS G. A. THOMPSON, S.R.N., S.R.F.N., S.C.M., H.V.Cert., Q.N. (to 31.5.1973)  
MISS M. J. ELLIOTT, S.R.N., S.C.M., H.V.Cert., Q.N. (from 1.6.1973)

#### **Area Nursing Officers:**

MISS D. M. BURRELL, S.R.N., S.C.M., H.V.Cert., Q.N.  
MISS H. M. H. LONGHURST, S.R.N., S.C.M., H.V.Cert., Q.N.  
MISS D. M. SIMMONS, S.R.N., S.C.M., H.V.Cert., Q.N.  
MISS M. WELLS, S.R.N., S.C.M., H.V.Cert., Q.N.

#### **Other Nursing Staff engaged in School Health Service Duties:**

##### **Health Visitors and School Nurses**

School nursing duties only, 1; combined duties, 54

##### **District Nurses and Midwives**

Duties combined with health visiting and school nursing, 13

#### **Senior Speech Therapist:**

MISS J. RUTT, L.C.S.T.

#### **Speech Therapists:**


##### **Full-time**

MRS. D. 'VIDA BEATON, B.A. (Natal), L.C.S.T.  
MISS D. M. BRAITHWAITE, L.C.S.T. (to 30.4.73)  
MRS. E. M. MACDONALD, L.C.S.T.  
MISS B. DYCKHOFF, L.C.S.T. (from 3.9.1973)

##### **Part-time**

MRS. D. BAMBRIDGE, L.C.S.T.  
MRS. S. HOLTHAM, L.C.S.T.

#### **24 Driver/Dental Attendants**



## PREFACE

I have the honour to present my annual report on the work of the school health service for the year 1973.

This will be the last report to be submitted in my capacity as Principal School Medical Officer as with reorganisation of local government and the national health service on the 1st April, 1974, the appointment will then cease.

The school health service was introduced in 1908 and has made a very great contribution to the improvement in the health of the school child, testifying to its value and amply justifying its role. However, further progress can still be made and there is a need for the activities of the school health service to continue within the changing administrative framework in the years that lie ahead. It will still have a function to detect defects as early as possible, to supervise the health of handicapped children and to assist in the process of matching educational provision to the disability.

I would like to take this opportunity of paying tribute to the sterling work carried out by all staff, past and present, in the school health service, and to thank the Education Committee for their support.

The school population is now over eighty thousand and the work which the service attempts to cover has increased apace.

The second year of selective examinations at ages ten and fifteen has now been completed and follows the pattern of the previous year. While there were fewer children selected for examination and while the number of 're-examinations' was slightly less, the number of 'special' examinations increased by 1,100. The percentage number of parents who attended medical inspections was approximately seventy-eight, the numbers reducing markedly in the leavers group.

With regard to vision screening by health visitors with the 'Keystone' apparatus, there was an increase in the number screened by about 4,000, mainly in the ten and thirteen age groups.

The number of children having one or more defects is shown as a slight increase of 0.9%.

The long-standing shortage of speech therapists became even more acute from April, when the therapist in the western part of the county retired. This left two areas without a therapist despite repeated advertisements in the local press and professional journals.

In September the Fred Nicholson residential school for educationally sub-normal pupils opened at East Dereham and it is expected this will ease the problem of finding suitable placement for some of the more backward children requiring urgent admission.

I should again like to express to the staff my appreciation of the work done in this final year of the school health service in its present form. My thanks are also due to the Chief Education Officer, his staff, and head teachers of the schools, for their courtesy and co-operation.

A. G. SCOTT

Health Department  
Norfolk Tower  
Surrey Street  
Norwich, NOR 48A  
March, 1974



# ANNUAL REPORT

## OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR 1973

### I. GENERAL STATISTICS

Area of administrative County .. .. . 1,301,014 acres  
Registrar General's mid-year estimate of population, 1973 .. 465,750  
Number of schools and number of pupils on registers:

Type of School	Number of schools	Number of pupils on registers
Primary .. .. .	393	49,818
Secondary Modern .. .. .	43	23,275
Secondary Grammar .. .. .	13	6,845
Nursery Schools .. .. .	3	145
Special Schools .. .. .	9	582
	<hr/> 461 <hr/>	<hr/> 80,665 <hr/>

### II. STAFF

The number of staff and whole-time equivalent employed in the School Health Service at 31st December, is given in the table below:

	31st December, 1972		31st December, 1973	
	No. employed	Estimated equivalent in terms of whole-time officers	No. employed	Estimated equivalent in terms of whole-time officers
Medical staff .. .. .	25	8.45	24	8.45
Dental officers .. .. .	16	15.00	18	17.00
Speech therapists .. .. .	6	4.60	6	4.60
School nurses .. .. .	71	11.27	74	13.25
Driver attendants .. .. .	21	18.82	24	22.00
Clerk attendants .. .. .	9	3.30	11	4.00
Totals .. .. .	148	61.44	157	69.30

Dr. C. H. B. Lawfield, assistant senior medical officer, who was granted a contract with the East Anglian Regional Hospital Board continued to act as honorary medical assistant in charge of the Hearing Assessment Clinic attached to the West Norfolk and King's Lynn General Hospital.



Unfortunately there was no improvement in the staffing position for speech therapists and vacancies still existed at the end of the year in the north and west of the county in spite of repeated advertising in professional journals, the local press and at speech therapy training colleges. Out of an establishment of 7 speech therapists the actual equivalent staff employed on 31st December was 4.6. The number of sessions worked by speech therapists together with the number of cases treated for the years 1969-1973 are given below:

Year	Staff on 31st December	Number of Sessions Worked	Number of Cases Treated
1969	4.8	1,748	1,049
1970	4.8	1,458	840
1971	4.6	1,392	848
1972	4.6	1,539	788
1973	4.6	1,082	752

### III. MEDICAL INSPECTION

The year under review was the second year of selective medical examination procedure, when all pupils in the entrants age group (normally between 5 and 6 years) continued to have periodic medical inspection as in the past. Selective examination took place for children in the intermediate age group (10-11) and the leavers age group (15-16). In addition to periodic and selective medical inspection, vision screening, including colour vision, at 8 and 13 years of age continued and audiometric screening of children aged  $5\frac{1}{2}$ - $6\frac{1}{2}$  is carried out by the health visitors. Any children found to have defects, either at the periodic medical examination or at a selective medical examination, were re-examined annually for as long as considered necessary and arrangements were also made for the examination of 'specials'. The following table summarises the arrangements now in force.

**Schedule of Medical and Dental Inspection and Other Examinations normally carried out during child's school life.**

<i>Age</i>	<i>Examination</i>
On entry, normally at 5 years of age .. ..	Full medical inspection by school medical officer.
6 years .. ..	Hearing test by health visitor and, where necessary, examination by school medical officer.
8, 10 and 13 years .. ..	*Testing of vision by health visitor.
10-11 years .. ..	Questionnaire followed by medical examination where appropriate by the school medical officer.
Any age .. ..	Re-examination where it is considered necessary to keep observation on a particular ailment or defect.
Any age .. ..	An examination at special request of parent or head teacher.
Any age .. ..	Periodic inspection by dental officer. Twice yearly inspection is the aim but frequency depends on treatment demand in the area.

\*Any child found to have defective vision is referred to the school medical officer to be examined as a 'special' at his next visit.

Head teachers are also invited to put forward for selective examination any child about whom they are concerned. The following table gives a summary of the results following the sending of questionnaires to parents, including the number of children actually selected for examination. The number of children actually selected are included in the tables on pages 29 to 30.

	Intermediates (10-11 years)	Leavers (15-16 years)
Number of questionnaires issued .. ..	4,836	1,640
Number of pupils examined at parents' request ..	382	76
Number of pupils examined at teachers' request ..	48	6
Total number of pupils selected for medical examinations .. .. .	437	95
Number of children examined as 're-inspections'	1,194	537
Number of questionnaires not returned .. ..	334	350
Number of pupils not examined .. .. .	4,126	1,126

The total number of pupils inspected during the year was 10,228, being 269 fewer than the number inspected in the previous year. The number of pupils noted by the examining medical officers to have a defect in previous years and who were re-examined was 10,512; a lower figure than in the previous year. In addition, 3,593 pupils were examined as 'specials' at the request of parents, head teachers or health visitors.

Health visitors continued to use the Keystone vision apparatus for screening the vision of 8-year, 10-year and 13-year-old pupils and the following table gives details of the number screened and the number, who failing the test, were recommended for examination by the school medical officer.

	Vision screened by Keystone screener	No. failed referred S.M.O.	Vision screened by other methods	No. failed referred S.M.O.
Number of 8-year-old children (Primary schools) .. ..	5,585	1,513	197	9
Number of 10 and 13-year-old children (Secondary grammar and Secondary modern schools) ..	9,107	2,057	158	11
Totals .. ..	14,692	3,570	355	20

The percentage number of parents who attended medical inspections was approximately seventy-eight.



## FINDINGS OF MEDICAL INSPECTION

The number of individual children who were found, at medical inspection, to have one or more defects considered to need treatment was 858 or 8.4% of the number of pupils examined. This was an increase compared with corresponding figures for 1972, the percentage figures for 1973 and the previous four years being:

1969	..	..	..	..	..	11.28%
1970	..	..	..	..	..	10.32%
1971	..	..	..	..	..	9.87%
1972	..	..	..	..	..	7.5%
1973	..	..	..	..	..	8.4%

### General Condition

The following table shows the percentage number of pupils found to have an unsatisfactory condition. It will be noted that only one child was considered to be unsatisfactory from this aspect.

Year	No. of pupils inspected	Satisfactory		Unsatisfactory	
		No.	%	No.	%
1969	18,237	18,222	99.92	15	0.08
1970	20,224	20,205	99.91	19	0.09
1971	18,072	18,061	99.94	11	0.06
1972	10,497	10,494	99.97	3	0.03
1973	10,228	10,227	99.99	1	0.01

## CLEANLINESS

The number of head inspections carried out by the health visitors during the year was 32,250 while the number of children found to be verminous was 350. This was an increase of approximately 4,000 inspections and 86 verminous children respectively. This figure is well below the latest national figure. Health visitors continue to follow up at school those pupils who were found to be verminous, offering advice and medicaments where necessary until such time as the condition was cleared up.

## HANDICAPPED SCHOOL LEAVERS

The procedure whereby handicapped school leavers are considered at conferences between representatives of all interested departments of the Council was continued during the year, adequate follow up of handicapped pupils leaving school thus being assured. Close liaison was maintained with the newly established Employment Medical Advisory Service and also with the general practitioners concerned.

## TRANSPORT OF CHILDREN TO AND FROM SCHOOL

The provision of transport, on medical grounds, to and from school was recommended in forty cases after the consideration of reports from hospital specialists, general practitioners and school medical officers. In addition sixteen children were examined where the provision of transport was not considered to be justified by the examining medical officer on medical grounds or could not be continued because of the improvement in the condition of the child concerned.



#### **IV. TREATMENT OF DEFECTS**

##### **CO-OPERATION WITH HOSPITALS AND GENERAL PRACTITIONERS**

Excellent co-operation continues to exist between school medical officers, hospital consultants and family doctors.

Before any child is referred to a specialist or for hospital treatment it is the practice, save for certain agreed conditions to consult the family doctor so that he will have the opportunity, if he wishes, to refer the child himself. In many cases, however, general practitioners are willing for children to be referred by school medical officers, provided they are fully informed of the results.

The routine reports, which are available from consultant paediatricians, cardiologists, chest physicians, etc., are very much appreciated and are found most helpful in relating educational needs to physical, mental or emotional defects.

##### **DEFECTIVE VISION**

During the year 451 pupils were found to have defects of vision (excluding squint) needing treatment and 1,056 were placed under observation. Special ophthalmic clinics for schoolchildren were continued through the co-operation of the hospital authorities at the Cromer and District, West Norfolk and King's Lynn General, Thetford Cottage and the Norfolk and Norwich Hospitals. During the year, 1,967 were referred to these clinics and spectacles prescribed for 906.

##### **Squint**

The number of children found at periodic medical inspection to need treatment for squint was 81.

Orthoptic clinics are held at four Norfolk hospitals.

##### **DEFECTS OF EAR, NOSE AND THROAT**

At medical inspections 113 children were referred for treatment and 1,170 placed under observation for diseases of the ear, nose and throat.

##### **SKIN DISEASE**

33 children were referred at medical inspections for treatment and 188 placed under observation for diseases of the skin.

##### **ORTHOPAEDIC DEFECTS**

The arrangements whereby children needing orthopaedic treatment are referred, with the consent of the family doctors, to the orthopaedic surgeons at the Norfolk and Norwich Hospital continued during the year.

#### **V. DENTAL TREATMENT**

The Principal School Dental Officer reports:

##### **STAFF**

From the somewhat bleak situation at King's Lynn mentioned in my last report, the clinic found itself fully staffed once again early in 1973 when Mr. J. McMullan and Mr. G. Brown joined the staff. About the same time the vacancy in the second surgery at Thetford was filled by Mrs. K. Lewis and thus the service became fully staffed apart from the single post which was being held for the Marshland district where a new clinic at Terrington St. Clement is being built and a mobile dental clinic provided to serve that area.

# DENTAL INSPECTIONS AND TREATMENT 1973

ATTENDANCES AND TREATMENT					Total
	Ages 5 to 9	Ages 10 to 14	Ages 15 and over		
First visit .. .. .	7,098	5,956	1,280		14,334
Subsequent visits .. .. .	7,390	9,664	2,771		19,825
Total visits .. .. .	14,488	15,620	4,051		34,159
Additional courses of treatment commenced .. .. .	739	339	87		1,165
Fillings in permanent teeth .. .. .	4,798	14,786	5,207		24,791
Fillings in deciduous teeth .. .. .	11,044	1,805	—		12,849
Permanent teeth filled .. .. .	3,858	12,682	4,661		21,201
Deciduous teeth filled .. .. .	10,171	1,715	—		11,886
Permanent teeth extracted .. .. .	565	2,195	582		3,342
Deciduous teeth extracted .. .. .	6,635	2,454	—		9,089
General anaesthetics .. .. .	1,240	534	49		1,823
Emergencies .. .. .	708	477	123		1,308

Number of Pupils X-rayed .. .. .	930
Prophylaxis .. .. .	2,123
Teeth otherwise conserved .. .. .	3,540
Number of teeth root filled .. .. .	46
Inlays .. .. .	3
Crowns .. .. .	37
Courses of treatment completed .. .. .	12,809

ORTHODONTICS					Total
New cases commenced during year .. .. .	193				
Cases completed during year .. .. .	181				
Cases discontinued during year .. .. .	21				
Number of removable appliances fitted .. .. .	337				
Number of fixed appliances fitted .. .. .	—				
Pupils referred to Hospital Consultant .. .. .	160				

PROSTHETICS					Total
Pupils supplied with full upper or full lower dentures (first time) .. .. .	—	—	3		3
Pupils supplied with other partial dentures (first time) .. .. .	4	77	25		106
Number of dentures supplied .. .. .	4	79	28		111

ANAESTHETICS					Total
General Anaesthetics administered by Dental Officers .. .. .	751				

INSPECTIONS					Total
(a) First inspection at school. Number of Pupils .. .. .	36,096				
(b) First inspection at clinic. Number of Pupils .. .. .	5,170				
Number of (a) plus (b) found to require treatment .. .. .	20,766				
Number of (a) plus (b) offered treatment .. .. .	17,590				
(c) Pupils re-inspected at school or clinic .. .. .	15,490				
Number of (c) found to require treatment .. .. .	4,121				

SESSIONS					Total
Sessions devoted to treatment .. .. .	5,910				
Sessions devoted to inspection .. .. .	545				
Sessions devoted to Dental Health Education .. .. .	92				





We were saddened to hear of the death of Mr. G. N. W. Booth in the summer, so short a time after his retirement as a part-time dental officer at Downham Market in March. Mr. A. H. Robb took up the appointment in Downham Market without any loss in service to that area.

Towards the end of the year the staffing pendulum began to swing in the opposite direction again when Mr. McMullan and Mrs. I. Collard regretfully gave their notice for domestic reasons. I wish to pay a particular tribute to Mrs. Collard who, over seven years, had built up an excellent service in Fakenham and Wells through much hard work and an exceptionally good dentist/patient relationship.

This year the establishment was increased by one dental officer completing the three year plan to increase dental staff from 16 to 19. The post was reserved for the service in the Marshland district as already mentioned. The Staff Committee considered the recommendation for introducing four senior dental officers but owing to financial restraint, agreed to one only from March, 1974. Thus the establishment which will be transferred eventually to the Area Health Authority from 1st April, 1974, will be:

- 1 Principal School Dental Officer
- 4 Area Dental Officers
- 1 Senior Dental Officer
- 14 Dental Officers
- 1 Dental Auxiliary

It had not been possible to fill the auxiliary post by the end of 1973 although the surgery was ready at Thorpe. With the projected increase in school population, the increase in dental officer establishment will still barely keep pace proportionately with the phenomenal rise in the number of school pupils.

### **Courses**

Mr. L. W. Brockhurst attended a course in Birmingham in preparation for his participation in the national survey which was carried out on the dental state of children in England and Wales. In October, Mr. Brockhurst also embarked on the course leading to the Diploma in Dental Public Health, the first dental officer from this authority to do so.

Several dental officers attended one and two-day courses on Preventive Dentistry and Paedodontics and also Forensic Dentistry organised by the Norfolk and Norwich Institute of Medical Education.

The principal school dental officer was allocated a place on one of the courses arranged for dentists on the subject of the impending National Health Service reorganisation. A one-day symposium was held at Ipswich in October on the same topic, which afforded an opportunity for a party of dental officers from the authority to hear and discuss the latest information.

### **Clinics and Equipment**

A new purpose-built clinic was completed, fitted with new equipment and came into use at Stalham. This replaced the inadequate upstairs premises in the secondary school.



In addition the following new equipment was also installed:

King's Lynn	.. ..	Aspirator
Downham Market	..	Aspirator, Operating Lamp and Dental Unit
Diss	.. ..	Dental Unit
Long Stratton	.. ..	X-ray unit
East Dereham	.. ..	Operating Lamp
Thorpe	.. ..	Dental Unit
Costessey	.. ..	Dental Unit

Several 'Dentech' automatic, daylight developing machines were also purchased. These machines obviate the necessity for fully equipped dark rooms in the processing of X-ray films. They are designed to save time, untidiness and give consistent results. Although the standard of equipment in clinics is generally good with new clinics exhibiting a high standard, it was apparent during the year that many of the old dental chairs now need replacing and also some older dental units. With this in mind, provision for this expenditure has been made in the budget for 1974-75. Unfortunately, the provision of high standard dental treatment calls for sophisticated, costly equipment.

### Dental Health Education

There was a continued demand by head teachers for dental health talks in schools. It was gratifying that several letters of appreciation were subsequently received which testified to the excellence of these demonstrations by Miss G. Hooley, the health education officer, who worked in close co-operation with the dental section. All new dental material in the health educational field was examined and screened for its suitability in schools by the principal school dental officer.

### General

A total of 7,138 sessions were worked in the dental services throughout the year which was 976 more than the previous year. The number of treatment sessions devoted to the school service was 5,910, an increase of 888. Consequently there was a greater volume of treatment carried out compared with the previous year. 4,294 extra fillings were inserted and 3,234 more extractions were carried out. The trend towards an increased ratio of deciduous to permanent teeth being filled halted this year. It was pointed out in my last report that the percentage of deciduous teeth to all teeth filled had risen to 41% but this figure reverted to 36% during 1973. Fortunately, emergency treatments decreased slightly.

The number of general anaesthetics rose by almost a half and the increase was mainly for children in the 5-9 year group. We were grateful to our medical anaesthetists including Dr. Dyer who commenced with us this year and contributed greatly to the service in the Thetford district.

The demand for orthodontic treatment continued to increase with 193 new cases being commenced. Completed cases numbered 181 and 160 children were referred to the consultants for advice.

The number of children receiving a dental inspection showed a small increase but the number who were re-inspected rose dramatically from 8,321 in 1972 to 15,490 this year. Although re-inspections, particularly at the clinics indicate an admirable follow-up system for those participating, with so many children



not yet receiving even one inspection during the year, it might be more satisfying and fairer to redeploy a certain amount of manpower. This is clearly indicated in some districts and this should be a priority following the reorganisation of the health services when the identity of senior staff is known. Redeployment of dental staff just prior to integration would seem unwise because the pooling of resources from 1st April, 1974, with neighbouring dental services will mean an improved distribution in any event. An overall re-think and re-shape after that date is the obvious strategy.

This, my last annual report of the Norfolk County Council's school dental service marks the passing of an era in dental care for schoolchildren. When planning our new mobile dental unit recently with its modern, sophisticated equipment and lay out, I came across photographs of the early horse-drawn caravan used in Norfolk fifty years ago. How times have changed! For years the school service laboured in primitive conditions with meagre finances. However, the importance of dental health was developed from those early days. Since the introduction of the National Health Service in 1948, dental awareness by the public has undoubtedly increased and more people, including children now take greater care of their teeth. Yet, with the increase in consumption of sweet foodstuffs the paradoxical situation arises whereby more dental treatment is needed and demanded because of the amount of decay. In 1924 approximately two-thirds of the schoolchildren inspected required treatment. The proportion has only improved to one-half in 1973 despite the fact that the service must now be about four to five times its size. Nevertheless great strides have been made in treatment procedures over the years for the benefit of patient and dentist alike and grossly neglected mouths and dental 'cripples' are not nearly so common nowadays. Undoubtedly, optimism in dental health for the future lies in preventive measures and there will be more emphasis in this direction. A unified health service in the near future will present an exciting and wonderful opportunity for a community dental service which will place its priorities, not least of which are children in order. Ultimately we trust that all branches of dentistry working with a common aim will achieve healthy mouths for the great majority with its accompanying better general health.

For their loyalty and hard work during my twelve years as principal school dental officer, I wish to record my sincere thanks to the dental officers and driver/attendants together with all staff of the Health and Education Departments who have co-operated so willingly over the years. My thanks too to our medical anaesthetists and hospital consultants. The service of course will not cease to exist under the new plans and I feel confident that all those I have mentioned will continue to give of their best for the dental health of Norfolk schoolchildren in the future.

## VI. HEALTH EDUCATION

An increasing number of health visitor sessions have been devoted to health education in schools during the year and medical and other health education staff are also spending more time on this work. It is important to note that many of these sessions form part of a proper health education programme or syllabus rather than isolated talks on individual subjects and it is apparent that headmasters are becoming more aware of the value of these programmes and of the contribution that medical or nursing staff can make to them. The health department is anxious to help in any way possible either by giving advice to head teachers on the form and content of such programmes or by providing assistance for certain lectures or group discussions as requested. Sometimes help can also be given with visual aids.



There have been discussions on the health education programmes between head teachers and senior medical and health education staff on more than one occasion during the year and these have helped towards an understanding of the needs and problems of each as well as clarifying how best to achieve their mutual aims and objectives. It is hoped that there will be similar opportunities in the future. The sort of topics to which health department staff can make a useful contribution are as follows:

1. General hygiene, diet, nutrition and obesity.
2. Menstruation, reproduction with reference to the health services available to expectant mothers.
3. Family planning and abortion with some reference to population problems.
4. The dangers of abuse of drugs, alcohol and smoking.
5. Venereal diseases.

Each school and college builds its own comprehensive syllabus, including reference to the above subjects, in its own way according to the aims and methods of the programme and the type of child to whom the instruction is directed.

Other examples of the kind of talks given by health visitors to certain children in the secondary modern schools are as follows:

1. *Hygiene.* Personal, care of the body—hair, feet and teeth, good grooming, etc.
2. *Social Problems.* Smoking, drugs, alcoholism, social habits, unmarried girl and baby. Local social and health services.
3. *Disease.* Nature of disease. Symptoms and physical illness, examples and effects. Social implications. Venereal diseases. Mental health—personality problems, etc.

It is hoped that every effort will be made to encourage health education activities in schools in the future.

## VII. HANDICAPPED PUPILS

### ASCERTAINMENT

The following table shows the number of formal ascertainments in each category carried out during the year.

	1973	1972
Blind .. .. .	—	—
Partially sighted .. .. .	3	5
Deaf .. .. .	2	1
Partially hearing .. .. .	14	10
Delicate .. .. .	8	7
Educationally subnormal .. .. .	139	152
Epileptic .. .. .	2	1
Maladjusted .. .. .	29	37
Physically handicapped .. .. .	23	23
Defective speech .. .. .	2	—
Multiple defects .. .. .	8	10
Total .. .. .	230	246

## SPECIAL EDUCATIONAL TREATMENT

The number and disposition of handicapped pupils is shown in the following table. Many children included in the appropriate column 'In Ordinary Schools' with less severe physical defects not needing to be admitted to a special school are given special help and adjustment of the curriculum at the ordinary school.

Categories	In res. or hospital spl. schools (incl. hostels)		In day special schools		In ordinary schools		Not at school		Totals		1973 grand totals	1972 grand totals
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Blind . . .	1	2	—	—	—	—	—	—	1	2	3	2
Partially Sighted	7	4	—	—	6	8	—	—	13	12	25	24
Deaf . . .	4	5	—	—	—	—	—	—	4	5	9	7
Partially hearing . .	2	4	—	—	68	53	—	—	70	57	127	121
Delicate . . .	10	2	—	—	26	20	—	—	36	22	58	58
E.S.N. . . .	79	39	209	152	254	144	—	1	542	336	878	829
Epileptic . . .	4	2	—	—	1	2	—	—	5	4	9	5
Maladjusted	54	10	1	4	48	15	—	—	103	29	132	109
Physically handicapped	10	5	10	11	49	48	1	2	70	63	133	115
Speech defects	1	—	—	—	7	2	—	—	8	2	10	9
Multiple defects	14	3	12	5	13	12	1	2	40	22	62	52
<b>Totals</b>	<b>186</b>	<b>76</b>	<b>232</b>	<b>172</b>	<b>472</b>	<b>301</b>	<b>2</b>	<b>5</b>	<b>892</b>	<b>554</b>	<b>1446</b>	<b>1331</b>

## SPECIAL SCHOOLS AND HOSTELS PROVIDED BY THE AUTHORITY

### (a) Sidestrand Hall for Educationally Subnormal Pupils

There were 79 pupils resident on 31st December, at Sidestrand Hall and in addition 13 children were attending as day pupils. During the year 22 children were admitted, including 11 day pupils. All leavers are routinely examined at home or at school by a medical officer to assess the need for future care and guidance as a preliminary to the conference on placement of school leavers and to advise on any particular problems. With regard to dental treatment, one of the Council's dental officers inspects children resident at the school and any treatment recommended is carried out at a convenient clinic.

### (b) Eden Hall, Bacton, for Delicate Pupils

This school provides for children suffering from the following conditions:

- (i) Debility, malnutrition and anaemia.
- (ii) Respiratory conditions (non-tuberculosis).
- (iii) Rheumatism, chorea, rheumatic heart disease.
- (iv) Non-contagious skin disease.
- (v) Congenital heart defect.



54 children were resident in the school at the end of the year. The medical classification and sending authority of these children are shown in the following table:

*Medical Classification of Children resident at Eden Hall on 31st December, 1973:*

	Boys	Girls	Total
Asthma .. .. .	28	3	31
Asthma and Eczema .. .. .	5	6	11
Bronchiectasis .. .. .	1	1	2
Bronchitis .. .. .	1	—	1
Chronic Bronchitis, Eczema and Debility	1	—	1
Diabetes .. .. .	2	—	2
Eczema .. .. .	1	—	1
Fragilitas Ossium .. .. .	—	1	1
General Debility .. .. .	1	—	1
Lesion of Central Nervous System .. .. .	1	—	1
Malnutrition .. .. .	1	—	1
Obesity .. .. .	1	—	1
Total .. .. .	43	11	54

<i>Sending Authority</i>	Boys	Girls	Total
Norfolk .. .. .	14	3	17
Bedfordshire .. .. .	—	1	1
Buckinghamshire .. .. .	1	—	1
Cambridgeshire and Isle of Ely .. .. .	4	1	5
Derbyshire .. .. .	1	—	1
Essex .. .. .	7	1	8
Grimsby County Borough .. .. .	1	—	1
Huntingdon and Peterborough .. .. .	1	2	3
Leicester County Borough .. .. .	2	—	2
Lincolnshire (Lindsey) .. .. .	2	—	2
London Borough of Bexley .. .. .	1	—	1
London Borough of Enfield .. .. .	1	—	1
Northamptonshire .. .. .	1	—	1
East Suffolk .. .. .	6	1	7
West Suffolk .. .. .	1	2	3
Total .. .. .	43	11	54

The senior medical officer, who keeps in close consultation with the headmaster and matron, is responsible for medical approval of all admissions and discharges. Brief medical reports are made available every term to those authorities sending pupils to the school and regular dental inspection is carried out by one of the Council's dental officers and any necessary treatment is arranged at a clinic.

**(c) Colne Cottage Hostel, Cromer, and Morley Hall Hostel, near Wymondham, for Maladjusted Pupils**

Children showing signs of emotional instability or psychological disturbance, who can still benefit from education at an ordinary school, can be admitted on medical recommendation to the sympathetic and sheltered environment provided at these hostels. During the year 8 children were admitted to Morley Hall and 5 to Colne Cottage and at the end of the year there were 31 and 20 pupils resident respectively at the hostels.

Conferences were held as required with Dr. A. G. Soddy, consultant child and family psychiatrist, acting as chairman of a team consisting of the senior medical officer, educational psychologist, warden and social workers.

**(d) Ethel Tipple School, King's Lynn, for Educationally Subnormal Pupils**

At the end of the year there were 69 pupils attending this day school which has a maximum capacity of 80.

**(e) The Fred Nicholson School, Toftwood, Dereham, for Educationally Subnormal Pupils**

The first pupils were admitted to this residential school on 24th September and at the end of the year there were 33 pupils attending.

**(f) Other Day Schools for Educationally Subnormal Pupils**

The medical supervision of pupils at the following special schools for severely subnormal pupils continued:

	Pupils in attendance at the end of the year
The Alderman Jackson School, King's Lynn .. .. .	79
The Chapel Road School, Attleborough .. .. .	79
The Edinburgh Road School, Holt .. .. .	32
The Hall School, Old Catton .. .. .	81
The Kevill Davies School (pupils are in-patients at Little Plumstead Hospital) .. .. .	51
	322

**DEAF AND PARTIALLY HEARING CHILDREN**

The screening by health visitors of the hearing of 6-year-old children continued during the year. Any child failing this test being followed up by the school medical officer and full assessment, including ear, nose and throat examination, carried out before it was decided whether further investigation was required. During the year 5,734 children were screened by the health visitor and of this number 742 failed the test or approximately 12.9%. The following table shows a summary of the work carried out during the year.

Number of schools visited during the year .. .. .	313
Number of pupils screened by health visitors/school nurses .. .. .	5,734
Number who failed the test by health visitors/school nurses:	
(i) One ear only .. .. .	436
(ii) Both ears .. .. .	306
Total .. .. .	742

Number of pupils subsequently examined by school medical officers:

(a) Found to have no hearing defect, no further action .. .. .	384
(b) Decision deferred pending treatment by general practitioner or school medical officer .. .. .	26
(c) Placed under observation by school medical officer .. .. .	231
(d) Referred to E.N.T. Clinic (after referral to general practitioner) .. .. .	107
(e) Recommended for referral to:	
(i) Speech Therapist .. .. .	2
(ii) General Practitioner .. .. .	4
Total .. .. .	754*

\*This figure includes pupils screened in the previous year and, therefore, not included in the 742 pupils given above who failed the test in 1973.



## EDUCATION OF HEARING IMPAIRED CHILDREN

I am indebted to the Chief Education Officer for the following report on facilities provided in the county for hearing impaired pupils during 1973:

### New Cases

170 children were referred for investigation of educational disadvantage. A substantial proportion were undergoing medical or surgical treatment which proved efficacious and enabled them to continue in local classes without any special supervision. These, together with others leaving the schools or area, accounted for 98. By the end of the year the caseloads of the teachers of the deaf rested at 354.

### Staffing

The number of children needing special teaching and supervision rose by 80 during the year. The Service was staffed by the Senior Teacher, assisted by 8 full-time and 2 part-time qualified teachers of the deaf, aided by 1 full-time remedial assistant.

### Research

The pilot study of the Paget Gorman Systematic Sign Language, started in 1972, continued throughout 1973. Courses held were attended by teachers and parents working together. In view of certain apparent advantages, it is hoped to extend its use more widely.

Because the system follows English usage exactly, it does not prevent the retention of the oral method and its emphasis on the use of residual hearing. The study will not be evaluated for some time, but will continue as part of the present system of counselling and guidance of parents of hearing impaired children.

### Special Schools

The numbers of children attending schools for the deaf or partially hearing were as follows:

East Anglian School, Church Road, Gorleston-on-Sea, Great Yarmouth.. .. .	13
Needwood School, Burton-on-Trent, Staffordshire .. .. .	1
Rayners School, Penn, Buckinghamshire .. .. .	1
Woodford Green School, Woodford Green, Essex .. .. .	1

## CHILD GUIDANCE

As indicated in last year's annual report, children living in the eastern part of the county are referred to the Department of Child and Family Psychiatry at the Jenny Lind Hospital in Norwich, where the consultant psychiatrist, Dr. A. G. Soddy, is in attendance. Close liaison is maintained with this service and with the School Psychological Service. Dr. Constance Roberts continued to attend the King's Lynn clinic and a summary of the work carried out there is given below:

Number of clinic sessions held .. .. .	62
Number of children examined for the first time .. .. .	62
Total number of children examined .. .. .	105
Total number of interviews with children and parents .. .. .	150

As before, referrals are made mainly by hospital specialists, general practitioners and the medical staff of the School Health Service, 80% of those examined for the first time coming from these sources. The remainder were referred by members of the staff of the Chief Education Officer, the Director of Social Services or by parents. Prominent in the reasons for referral was 'school phobia' and other problems relating to school attendance, while general emotional and behaviour problems accounted for the remainder of the children examined.

Follow up of children in the home was carried out by the education social workers and in the school by the educational psychologists.

### **SPEECH THERAPY**

There was still a continuing shortage of applicants for the vacant posts of speech therapists and vacancies in West Norfolk and North Norfolk still existed at the end of the year in spite of repeated advertising and appeals to colleges providing speech therapy training. It was, therefore, not possible to provide therapy for large numbers of children in the county, particularly in the two areas which were vacant. The statistics regarding the number of children attending and discharged are given below. These do not include the number of children treated by Miss Rutt, the senior speech therapist, at the Great Yarmouth Clinic and at the Jenny Lind Hospital where she attends by arrangement with the appropriate authorities.

### **SPEECH THERAPY CLINICS**

Number of sessions held	..	..	..	..	..	..	1,082
Total number of children treated during the year	..	..	..	..	..	..	752
Number of new cases referred during the year	..	..	..	..	..	..	191
Number discharged or transferred to other clinics	..	..	..	..	..	..	226

### **CHILDREN DISCHARGED—RESULTS OF TREATMENT**

Normal speech	..	..	..	..	..	..	..	60
Speech greatly improved	..	..	..	..	..	..	..	81
Speech showed some improvement	..	..	..	..	..	..	..	28
Speech showed little or no improvement	..	..	..	..	..	..	..	11
Initial interview only	..	..	..	..	..	..	..	27
Total	..	..	..	..	..	..	..	207

### **HOME TUITION**

The Education Committee, as in previous years, provided home tuition on the recommendation of the Principal School Medical Officer for children who were ascertained as handicapped pupils. During the year 12 boys and 10 girls were provided with home tuition and in addition a number of pupils who were long stay patients in Norfolk hospitals were also given tuition.

### **HEART CLINICS**

Dr. W. A. Oliver, consultant, held special heart clinics for Norfolk children at the Norfolk and Norwich Hospital. During the Year 292 examinations took place.



## VIII. PROVISION OF MILK AND MEALS

I am indebted to the Chief Education Officer for the following table:

No. of pupils in attendance at October 1973	Meals			Milk	
	Free	Paid	% of those attending	1/3rd pint free	% of those attending
Primary .. .. 46,039	3,183	32,418	77.3	18,589	93.9
Secondary modern and secondary grammar .. .. 26,829	2,135	18,264	76.0	—	—
Nursery .. .. 128	8	97	82.0	115	90.0
Totals 1973 72,996 (1972) (69,003)	5,326 (5,918)	50,779 (45,282)	76.9 (74.2)	18,704 (17,934)	93.9 (91.4)

## IX. VACCINATION AND IMMUNISATION

### Diphtheria Vaccination

Primary courses have been administered to children who had missed receiving this protection in infancy. Reinforcing doses have continued at a high level for children entering school to maintain the protection obtained in infancy.

	Primary Immunisation	Booster Doses
1969 .. .. .	199	6,535
1970 .. .. .	437	6,810
1971 .. .. .	474	6,681
1972 .. .. .	703	5,065
1973 .. .. .	351	5,733

There were no cases of diphtheria reported during 1973.

### Tetanus Vaccination

Protection against tetanus, either singly or in combination with diphtheria, is available at school entry to all children requiring a primary course or a booster dose and a further reinforcing dose is again offered at fifteen years of age. 598 children between the ages of four and fifteen years received primary immunisation in 1973 and a further 7,884 were given a booster dose.

### Poliomyelitis Vaccination

A primary course of immunisation against poliomyelitis consists of three doses of oral vaccine, and a reinforcing dose has been offered to children on school entry or not less than one year following the primary course. In 1973, 332 children in the four to fifteen years group received primary immunisation and 6,415 were given a booster dose.

### Measles Vaccination

Vaccine doses administered to children aged between four years and fifteen years total 1,033.

### Rubella (German Measles) Vaccination

Year								Total of 13-year-old girls vaccinated
1970	..	..	..	..	..	..	..	1,078
1971	..	..	..	..	..	..	..	2,727
1972	..	..	..	..	..	..	..	2,302
1973	..	..	..	..	..	..	..	2,494

### B.C.G. Vaccination

The administration of the Council's scheme was continued in accordance with the recommendations of the Department of Health and Social Security. During the year, 3,816 school children were skin tested and of the 3,280 who were found to be suitable for vaccination, 3,305 received the B.C.G. vaccine.

## X. SANITARY CIRCUMSTANCES AT SCHOOLS

Improvements in the sanitary facilities at a number of schools were made as the result of recommendations arising from surveys made during medical inspections. These dealt mainly with inadequacies in hot water supplies, heating and ventilation arrangements, lighting, drainage and washing and closet accommodation. The majority of the recommendations were concerned with the conditions at the older county schools.

## XI. SCHOOL MEALS SERVICE

Arising from 826 visits made to school canteens by the county public health inspectors, recommendations for improvements under the Food Hygiene Regulations were referred to the Chief Education Officer's department in respect of unsatisfactory conditions at 11 schools.

A high standard of food hygiene and preparation continued to reflect great credit on the canteen staffs who, in some cases, work under difficulties in overcrowded kitchens and in others where outdated structures and the difficulty of siting equipment in accordance with modern practice apply. No cases of sickness or food poisoning were found to be attributable during the year to school meals.

As in previous years excellent liaison and co-operation was maintained with officers responsible for the service and food hygiene talks were continued for school meals staff.

Foodstuffs continued to be inspected at all schools and condemnation certificates were issued in respect of foods found to be unfit for human consumption either as a result of routine inspections or those made on complaint. In this work liaison was maintained as necessary with the public health inspectors of the district councils.

Meals continue to be eaten in classrooms at a number of schools and whilst it is desirable that this situation should be overcome as soon as possible great care is usually taken by the teaching staffs to ensure that there is no detriment to the children's health.



## XII. MILK IN SCHOOLS SCHEME

During the year all schools participating in the scheme were in receipt of a bottled pasteurised milk supply. The results of samples submitted from the department are shown in the following table and the void results relate to those samples which were not examined because of the atmospheric shade temperature exceeding 70°F during their period of storage at the laboratory.

Test	No. of examinations	Satisfactory	Unsatisfactory	Void
Phosphatase	313	312	1	—
Methylene Blue	307	228	59	20
	<hr/> 620 <hr/>	<hr/> 540 <hr/>	<hr/> 60 <hr/>	<hr/> 20 <hr/>

The samples are taken at the schools and complement the statutory sampling under the Milk (Special Designation) Regulations, 1963, of suppliers' milk in transit or at the dairies. Methylene blue failures of school milk samples usually result in the necessity to improve storage arrangements at the schools and suitable advice was given as necessary.

214 samples of school milk were submitted to the Weights and Measures Department of the County Council for Gerber examination and 1 proved unsatisfactory.

## XIII. SCHOOL SWIMMING POOLS

The inspection and sampling by the county public health inspectors of all school swimming pools continued during the year and a satisfactory sampling record reflected a continued high standard of care and maintenance due to the co-operation received from the head teachers and other staff at the schools. Of a total of 210 samples submitted 11 contained bact. coli (type 1) necessitating inspection and advice. 21 covered and heated pools were in operation throughout the year and 25 open air pools operated during the summer months. Additional pools were either under construction at the end of the year or were projected. With one exception all pools, including 5 in private ownership and used by children from county schools in co-operation with the owners were equipped with continuous purification equipment of varied types.

## XIV. REMAND HOME

The remand home at Bramerton continued to be visited by members of headquarters medical staff. Children are admitted from the areas of several local authorities and during the year 21 Norfolk boys and 8 girls were admitted. 20 Norfolk boys and 8 Norfolk girls were examined by the psychiatrist and in addition 2 girls were examined by a consultant physician.

## XV. CHILDREN'S HOMES

The regular inspection by medical officers of children's homes maintained by the Social Services Committee was continued and reports submitted on the hygienic conditions of the premises. Any child needing dental treatment was, where practicable, treated at the appropriate clinic.

## XVI. MISCELLANEOUS

### Holidays for Handicapped Children

The scheme whereby handicapped children, in several categories, were provided with a holiday continued during the year and included, for the first time, holidays for severely subnormal children and four pupils attended from Norfolk Day Special Schools. This was held at Lowestoft and arranged by the National Society for Mentally Handicapped Children. Two children attended a camp for diabetics, one maladjusted boy a camp at Whitwell Hall and fifteen physically handicapped children spent a holiday at Wells-next-the-Sea arranged by the British Red Cross Society under a scheme whereby the cadet section of the society were closely involved with the activities of the children attending. This venture was greatly appreciated by the children and their parents and was most successful.

### Medical Examinations

The following examinations were carried out by medical staff of the Health Department.

439 examinations of candidates for teachers training colleges and entrants to the teaching profession under the terms of circular 248 and 249 of the Department of Education and Science.

288 questionnaires were completed by canteen workers involved in food handling duties and where necessary medical examinations were arranged.



# SCHOOL HEALTH SERVICE

## LIST OF CLINICS as at 31st December, 1973

Name and address of clinic	Type of treatment provided	Frequency of sessions
ACLE		
V.P. School .. ..	Speech therapy	One session weekly
	Dental	Six sessions weekly
ATTLEBOROUGH		
Secondary Modern School..	Speech therapy	One session weekly
	Dental	Five sessions weekly
AYLSHAM		
Secondary Modern School..	Speech therapy	One session weekly
	Dental	Three sessions weekly
CAISTER		
Secondary Modern School..	Speech therapy	One session only
County Primary Infants' School .. ..	Speech therapy	
COSTESSEY		
County Primary School ..	Dental	Three sessions weekly
CROMER		
Local Health Office, Norwich Road .. ..	Dental	Four sessions weekly
DISS		
Secondary Modern School..	Dental	Ten sessions weekly
	Speech therapy	One session weekly
DOWNHAM MARKET		
Local Health Office, 48 Howdale Road ..	Dental	Six sessions weekly
EAST DEREHAM		
Local Health Office, High Street .. ..	Dental	Seven sessions weekly
	Speech therapy	Two sessions weekly
FAKENHAM		
Local Health Office, Baron's Close .. ..	Dental	Six sessions weekly

Name and address of clinic	Type of treatment provided	Frequency of sessions
<b>FRAMINGHAM EARL</b>		
Secondary Modern School ..	Dental	Four sessions weekly
<b>HELLESDON</b>		
County Primary Infants' School, Kinsale Avenue ..	Dental	Four sessions weekly
	Speech Therapy	Two sessions weekly
<b>HINGHAM</b>		
County Primary School ..	Speech therapy	One session weekly
<b>HOVETON</b>		
The Broadlands School ..	Dental	Four sessions weekly
<b>KING'S LYNN</b>		
Local Health Office, 15 Nelson Street .. ..	Child psychiatry	One session weekly
Gaywood Park Secondary School .. .. .	Dental (2 Surgeries)	Twenty sessions weekly
<b>LODDON</b>		
Secondary Modern School ..	Dental	Two sessions weekly
<b>LONG STRATTON</b>		
Secondary Modern School ..	Dental	Ten sessions weekly
Health Centre .. ..	Speech Therapy	One session weekly
<b>METHWOLD</b>		
Secondary Modern School ..	Dental	Four sessions weekly
<b>NEW HUNSTANTON</b>		
Secondary Modern School ..	Dental	Six sessions weekly
<b>NORTH WALSHAM</b>		
Secondary Modern School ..	Dental	Six sessions weekly
County Primary School ..	Speech therapy	One session weekly
<b>NORWICH</b>		
52 Thorpe Road .. ..	Speech therapy	Eight sessions weekly
Local Health Office, Aspland Road .. ..	Dental	One session weekly
<b>OLD BUCKENHAM</b>		
Secondary Modern School ..	Speech therapy	One session weekly
<b>REDENHALL</b>		
Secondary Modern School ..	Speech Therapy	One session weekly



Name and address of clinic	Type of treatment provided	Frequency of sessions
<b>REEPHAM</b>		
Secondary Modern School..	Dental	Three sessions weekly
<b>SHERINGHAM</b>		
Secondary Modern School..	Dental	Four sessions weekly
<b>SPROWSTON</b>		
County Primary School ..	Dental	Four sessions weekly
<b>STALHAM</b>		
Secondary Modern School..	Dental	Four sessions weekly
	Speech therapy	One session weekly
<b>SWAFFHAM</b>		
Secondary Modern School..	Dental	Six sessions weekly
County Primary Infants School .. .. .	Speech therapy	One session weekly
Youth Centre .. .. .	Speech therapy	One session weekly
<b>TERRINGTON ST. CLEMENT</b>		
Secondary Modern School..	Dental	Four sessions weekly
<b>THETFORD</b>		
Local Health Office, Tanner Street .. .. .	Speech therapy	Two sessions weekly
Abbey Farm County Primary School .. .. .	Dental (2 Surgeries)	Sixteen sessions weekly
<b>THORPE</b>		
County Primary School, Hill-side Avenue .. .. .	Dental	Six sessions weekly
<b>WATTON</b>		
Secondary Modern School..	Dental	Four sessions weekly
	Speech therapy	One session weekly
County Primary School ..	Speech therapy	One session weekly
<b>WELLS-NEXT-SEA</b>		
County Primary School ..	Dental	Four sessions weekly
<b>WYMONDHAM</b>		
Secondary Modern School	Dental	Five sessions weekly
	Speech therapy	Two sessions weekly

**MEDICAL INSPECTION AND TREATMENT**  
(Excluding Dental Inspection and Treatment)

Return for the Year ended 31st December, 1973

**PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**TABLE A—PERIODIC MEDICAL INSPECTIONS**

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED		Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory	For defective vision (excluding squint)	For any other condition recorded at Part II	Total individual pupils
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1969 and later	883	883	—	30	55	69
1968	3,565	3,565	—	85	160	213
1967	2,411	2,411	—	70	111	166
1966	591	591	—	18	23	37
1965	430	430	—	38	16	53
1964	258	258	—	26	24	44
1963	335	335	—	21	38	47
1962	440	440	—	32	32	56
1961	335	335	—	33	23	50
1960	284	284	—	31	3	34
1959	388	388	—	44	8	49
1958 and earlier	358	357	1	23	20	40
Total ..	10,228	10,227	1	451	513	858

Col. (3) total as a percentage of Col. (2) total 99.99%— } to two places of decimals  
Col. (4) total as a percentage of Col. (2) total 0.01%— }



**PART II—DEFECTS FOUND BY PERIODIC AND SPECIAL  
MEDICAL INSPECTIONS DURING THE YEAR**

Defect Code No.	Defect or Disease					PERIODIC INSPECTIONS				Special Inspection
						Entrants	Leavers	Others	Total	
4.	Skin .. .. .	T	O	23	145	—	3	10	33	11
5.	(a) Vision .. .. .	T	O	279	939	6	15	166	451	484
		T	O	78	135	—	1	3	81	28
	(b) Squint .. .. .	T	O	4	23	—	3	1	5	4
		T	O	—	—	—	—	2	28	11
	(c) Other .. .. .	T	O	39	343	—	2	5	44	72
		T	O	14	183	—	1	4	18	9
6.	(a) Hearing .. .. .	T	O	—	—	—	—	9	193	29
		T	O	—	—	—	—	1	1	5
	(b) Otitis Media .. .. .	T	O	21	—	—	—	1	22	7
		T	O	—	—	—	—	—	—	—
7.	Nose and Throat .. .. .	T	O	39	531	—	4	12	51	45
		T	O	—	—	—	—	32	567	87
8.	Speech .. .. .	T	O	41	319	—	1	15	56	72
		T	O	—	—	—	—	31	351	68
9.	Lymphatic Glands .. .. .	T	O	1	41	—	—	—	1	5
		T	O	—	—	—	—	1	42	9
10.	Heart .. .. .	T	O	18	120	—	—	4	22	11
		T	O	—	—	—	—	18	138	22
11.	Lungs .. .. .	T	O	26	222	—	—	8	34	12
		T	O	—	—	—	—	30	252	91
12.	(a) Hernia .. .. .	T	O	10	25	—	—	1	11	7
		T	O	—	—	—	—	4	29	15
	(b) Other .. .. .	T	O	22	261	—	—	4	26	61
		T	O	—	—	—	—	23	284	71
13.	(a) Posture .. .. .	T	O	—	35	—	—	4	4	4
		T	O	—	—	—	—	7	42	15
	(b) Feet .. .. .	T	O	12	224	—	2	5	17	9
		T	O	—	—	—	—	23	249	22
	(c) Other .. .. .	T	O	12	175	—	9	11	23	10
		T	O	—	—	—	—	21	205	28
14.	(a) Epilepsy .. .. .	T	O	6	20	—	—	9	15	5
		T	O	—	—	—	—	4	24	17
	(b) Other .. .. .	T	O	5	76	—	—	6	11	23
		T	O	—	—	—	—	13	89	51
15.	(a) Development .. .. .	T	O	12	198	3	1	22	37	82
		T	O	—	—	—	—	46	245	255
	(b) Stability .. .. .	T	O	2	116	—	2	4	6	8
		T	O	—	—	—	—	21	139	66
16.	Abdomen .. .. .	T	O	14	88	—	—	3	17	12
		T	O	—	—	—	—	5	93	23
17.	Other .. .. .	T	O	20	323	1	1	6	27	47
		T	O	—	—	—	—	79	403	240
	TOTALS .. .. .	T	O	677	4,563	10	45	304	991	1,026
		T	O	—	—	—	—	562	5,170	2,156

**PART III—TREATMENT OF PUPILS ATTENDING MAINTAINED  
PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY  
AND SPECIAL SCHOOLS)**

**TABLE A—EYE DISEASES, DEFECTIVE VISION AND SQUINT**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint .. ..	—
Errors of refraction (including squint)	1,967
Total .. ..	1,967
Number of pupils for whom spectacles were prescribed .. ..	906

**TABLE B—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT**

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear .. ..	*
(b) for adenoids and chronic tonsili- tis .. ..	*
(c) for other nose and throat condi- tions .. ..	*
Received other forms of treatment ..	*
Total .. ..	*
Total number of pupils still on the register of schools at 31st December, 1973, known to have been provided with hearing aids:	
(a) during the calendar year 1973..	9
(b) in previous years .. ..	84

**TABLE C—ORTHOPAEDIC AND POSTURAL DEFECTS**

	Number of cases known to have been treated
(a) Pupils treated at clinics or out- patients departments .. ..	*
(b) Pupils treated at school for postural defects .. ..	*
Total .. ..	*

\*Figures not available



**TABLE D—DISEASES OF THE SKIN**  
(excluding uncleanness, for which see Table C of Part 1)

	Number of pupils known to have been treated			
Ringworm—(a) Scalp .. ..	*			
(b) Body .. ..	*			
Scabies .. .. .	*			
Impetigo .. .. .	*			
Other skin diseases .. ..	*			
Total .. ..	*			

**TABLE E—CHILD GUIDANCE TREATMENT**

	Number of pupils known to have been treated
Pupils treated at Child Guidance clinics	105

**TABLE F—SPEECH THERAPY**

	Number known to have been treated
Pupils treated by speech therapists ..	752

**TABLE G—OTHER TREATMENT GIVEN**

	Number known to have been treated
(a) Pupils with minor ailments ..	—
(b) Pupils who received convalescent treatment under School Health Service arrangements .. ..	—
(c) Pupils who received B.C.G. vaccination .. .. .	3,305
(d) Other than (a), (b), and (c) above Please specify	—
Total (a) — (d)	3,305

\* Figures not available

